Permit # _____
APN # _____**CITY OF MESQUITE**
RESIDENTIAL DWELLING BUILDING PERMIT APPLICATION

{For inspections, phone 346-6156}

Street Address of Job Site: _____ Zip Code: 89027

Owner: _____ Phone Number: () _____

Owner's Address: _____

General Contractor: _____ Phone Number: () _____

Contractor's Mailing Address: _____

Contractor's Nevada State License # _____ Class _____ Mesquite City Business License # _____

Project/Subdivision: _____ Phase # _____ Lot # _____ Unit _____

Number of Levels: _____ Number of Units: _____ Occupancy: _____ Construction Type: _____
Living Sq. Ft.: _____ Garage: _____ Porch: _____ Courtyard/Other: _____ Total Sq. Ft Under Roof: _____Use: ☐ Single Family Detached ☐ Single Family Attached ☐ Multi-FamilyPlans: ☐ Attached to Permit ☐ On File # _____

Description of Work: _____

(Permit covers only the work specified) **Permittee is to build according to above description and to the approved plans and specifications with regards to the Building Code on behalf of the City of Mesquite and to submit to this Department for all required change orders and as each building phase comes to completion.

GENERAL CONTRACTOR/OWNER SIGNATURE: _____ Date: _____

I hereby certify that the information provided on this application form, and any plans submitted, is complete and correct and request the issuance of a permit with the City of Mesquite. I also certify that all Subcontractors working on this permit are licensed within the City of Mesquite and the State of Nevada.

SUBCONTRACTORS INFORMATION:

PLUMBING Contractor Co: _____ Contr. Lic No. _____ City Bus. Lic. No. _____

Q.P. License Holder: _____ Q.P. Lic. Holder: _____
(Print Full Name) (Signature) (Date)

ELECTRICAL Contractor Co: _____ Contr. Lic No. _____ City Bus. Lic. No. _____

Q.P. License Holder: _____ Q.P. Lic. Holder: _____
(Print Full Name) (Signature) (Date)

MECHANICAL Contractor Co: _____ Contr. Lic No. _____ City Bus. Lic. No. _____

Q.P. License Holder: _____ Q.P. Lic. Holder: _____
(Print Full Name) (Signature) (Date)

This permit is being issued subject to the following _____

TIME LIMIT ON EXERCISE OF APPROVAL OR PERMIT: If granted, the approval or permit requested for the proposed development shall be effective as of the date of final action as defined in Ordinance No. 117 and must be exercised within the applicable time period as set forth therein. If no time period is specified, the approval or permit must be exercised within six (6) months of the date of final action. The applicant may request that the City specify the date of final action and the expiration date and include such dates on the approval or permit.

****For Office Use Only******VALUATION: \$** _____

Permit Fee: _____

Plan Check Fee: _____

Admin Fee: _____

Trans. Structure Impact Fee: _____

Park Fees: _____

RTC Fees: _____

VRHCP Fee: _____

Sewer Fees: _____

Total Single Family Units: _____

Total Multi-Family Units: _____ @ _____ = _____

Existing ERU's: _____

Total ERU: _____

ELECTRICAL: Residential Sq. Ft. _____ x .045 = Fee: _____

PLUMBING: Residential Sq. Ft. _____ x .035 = Fee: _____

MECHANICAL: Residential Sq. Ft. _____ x .030 = Fee: _____

Total Due: _____

Submittal Fee: _____

Check # _____

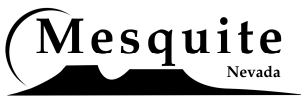
Balance Due: _____

Check # _____

Issued By: _____

City of Mesquite Building Department

Date: _____



RESIDENTIAL / DWELLING PLAN REVIEW SUBMITTAL

- ___ **3 sets of complete building plan packages (site plans, architectural, structural, mechanical and electrical). The minimum size of plans can be 24" x 36" sheets.**
- ___ **2 Soils report (Pad Certification) which must be wet-stamped by a Nevada Engineer**
- ___ **2 Grading and Drainage Certifications**
- ___ **2 pre-engineered truss drawings with hanger hardware called out (if used)**
- ___ **2 structural calculations (if required)**
- ___ **2 energy calculations ('06 IECC)**
- ___ **1 copy of receipt from Virgin Valley Water District for paid water impact fee**
- ___ **Plans are in compliance with all CC&R's on property**
- ___ **1 permit Application with ALL signatures and information including correct address**
- ___ **Submittal fee of \$700 to be paid when plans are submitted**

SIGNATURE: _____ **DATE:** _____
Contractor/Applicant